Image# 11931312229

FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1	ORGANIZATION		
i Oitiui i	(See instructions)		Office use only
NAME OF COMMITTEE (in	full) (Check if name Example: over the I	: If typying, type lines 12FE4Ms	5
Chesapeake I	AC		
ADDRESS (number and	street) 2470 Daniell's Bridge Rd Ste 12	.1	
(Check if address X is changed)	s		
	Athens	GA	30606
	CITY▲	STATE▲	ZIP CODE 📥
COMMITTEE'S E-MA	IL ADDRESS (Please provide only one e-mail address)		
(Check if address is changed)	s paul@pdscompliance.com		
(Check if address is changed)  2. DATE	M / D D / Y Y Y Y		
0.2	2 01 2011		
3. FEC IDENTIFICA	ATION NUMBER C C00492	2819	
4. IS THIS STATE!	MENT X NEW (N) OR	AMENDED (A)	
I certify that I have exam	ined this Statement and to the best of my knowledge and bel	lief it is true, correct and complete	
		······································	
Type or Print Name of	Treasurer Paul Kilgore		
Signature of Treasure	r Electronically Filed by <b>Paul Kilgore</b>	Date 0	5
NOTE: Submission of fa	alse, erroneous, or incomplete information may subject the pe		
Office Use Only	For Fed	further information contact: leral Election Commission Free 800-424-9530	FEC FORM 1 (Revised 02/2009)